FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPR	OVAL
0.110 14.1.001	35-0076
Expires April 30, 2	2008
Estimated average but	rden
hours per response:	16.00

	SEC USE ONLY	
Prefix	Serial	
	<u> </u>	
	DATE RECEIVED	
	PROCESSE)
	JAN 2 5 2008	
	2. m. E 2 2000	

Name of Offering (check if this is an amendme		
Goldman Sachs Direct Strategies 2006 Fund		SEC THOMSC.
Filing Under (Check box(es) that apply): R	ule 504 □ Rule 505 ☑ Rule 506	Section 4(6) all P.D. ULOES FINANCIAL
Type of Filing: ☐ New Filing ☑ Amendm		Section
	A. BASIC IDENTIFICATION DATA	20
1. Enter the information requested about the issue	er	JVN 1 A VIDO
Name of Issuer (☐ check if this is an amendme	ent and name has changed, and indicate change.)	
Goldman Sachs Direct Strategies 2006 Fund		Washington, DC
	imber and Street, City, State Zip Code)	Telephone Number (including Area Code)
32 Old Slip, New York, New York 10005		(212) 902-1000
	Number and Street, City, State and Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business	·····	
To operate as a private investment fund.		
Type of Business Organization		08022362
☐ corporation	☐ limited partnership, already formed	✓ other (please specify):
☐ business trust	☐ limited partnership, to be formed	Limited Liability Company
Actual or Estimated Date of Incorporation or Org	Month Year 0 2 0 6	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrevia State: CN for Canada; FN for other foreign ju	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Enter the information requested for the following:											
* Each promoter of the issuer, if the issuer has been organized within the past five years;											
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;											
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and											
* Each general and managing partner of partnership issuers.											
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner											
Full Name (Last name first, if individual)											
Goldman Sachs Asset Management, L.P. (the Issuer's Managing Member)											
Business or Residence Address (Number and Street, City, State, Zip Code)											
32 Old Slip, New York, NY 10005											
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner											
Full Name (Last name first, if individual)											
Chropuvka, Gary W.											
Business or Residence Address (Number and Street, City, State, Zip Code)											
32 Old Slip, New York, NY 10005											
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner											
Full Name (Last name first, if individual)											
Ioffe, Len											
Business or Residence Address (Number and Street, City, State, Zip Code)											
32 Old Slip, New York, NY 10005											
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner											
Full Name (Last name first, if individual)											
Litterman, Robert B.											
Business or Residence Address (Number and Street, City, State, Zip Code)											
32 Old Slip, New York, NY 10005											
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner											
Full Name (Last name first, if individual)											
Marshall, David											
Business or Residence Address (Number and Street, City, State, Zip Code)											
32 Old Slip, New York, NY 10005											
Check Box(es) that Apply:											
Full Name (Last name first, if individual)											
Mulvihill, Donald J.											
Business or Residence Address (Number and Street, City, State, Zip Code)											
32 Old Slip, New York, NY 10005											
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner											
Full Name (Last name first, if individual)											

A. BASIC IDENTIFICATION DATA

Business or Residence Address (Number and Street, City, State, Zip Code)

				B. INI	FORMAT	ION ABC	UT OFFI	ERING		-		
			•					-			Yes	No
1. Has the	e issuer solo	l, or does th	e issuer inte									Ø
			A	answer also	in Appendi	ix, Column	2, if filing ι	ınder ULOE	Ξ.			
2. What is the minimum investment that will be accepted from any individual?								\$	0,000*			
*The Issue 3. Does th	er may acc he offering	e pt subscri p permit joint	ptions for le ownership	esser amou of a single	nts in the so	ole discreti	on of the M	lanaging M	lember.		Yes ☑	No
commi If a per or state	ssion or sin rson to be li es, list the n	nilar remund isted is an a name of the	ted for each eration for s ssociated pe broker or do et forth the i	olicitation erson or age ealer. If mo	of purchase int of a brok ore than five	rs in connecter or dealer e (5) person	ction with s registered s to be liste	ales of secu with the SE	rities in the C and/or wi	offering. th a state		
Full Name	(Last name	first, if ind	ividual)		<u>.</u>							
Coldman	Sachs & C	'n.										
			Number and	Street, City	y, State, Zip	Code)				-		
85 Broad	Street, Nev	v York, Nev	w York 10	004								
		Broker or De		-			<u>.</u>			- -		
			s Solicited				•		<u> </u>		FΙΑ	li States
•	(AK)	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[AL] [IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	(MS)	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
		first, if ind	lividual)			<u></u>	<u> </u>		-			
Business o	r Residence	e Address (l	Number and	Street, Cit	v. State, Zip	Code)					_	<u></u>
		`			•							
Name of A	Associated E	Broker or De	ealer		<u></u> _					-	<u></u>	
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	ırchasers						
								•••••	•••••			1 States
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	: (Last name	e first, if ind	lividual)									
Business o	r Residence	e Address (l	Number and	Street, Cit	y, State, Zip	Code)						
							_					
Name of A	Associated F	Broker or De	ealer						`			
States in V	Vhich Perso	n Listed Ha	as Solicited	or Intends t	o Solicit Pu	ırchasers		·············				All States
									(FL)	[GA]	(HI)	[ID]
[AL]	[AK]	[AZ]	[AR]	(CA)	[CO]	(CT)	[DE]	[DC] [MA]	(rL) [MI]	[GA] [MN]	[MS]	[MO]
[IL]	(IN)	[IA]	[KS]	[KY]	[LA] [NM]	(ME) [NY]	[MD] [NC]	[ND]	(MI) [OH]	[OK]	[OR]	[PA]
[MT] IRII	[NE] (SC)	[NV] ISDI	[NH] [TN]	[NJ] · [TX]	[UT]	[VT]	[NC] [VA]	[WA]	[WV]	[WI]	[WY]	[PR]
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$_	0	\$.	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$_	0	\$	0
	Partnership Interests	\$_	0	\$	0
	Other (Specify: Limited Liability Company Units)	\$	756,054,962	\$	756,054,962
	Total			\$	756,054,962
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	_	456	\$	756,054,962
	Non-accredited Investors	_	0	\$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		· ·		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Turn of		Dellos Amount
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505	_	N/A	\$	N/A
	Regulation A		N/A	\$	N/A
	Rule 504		N/A	\$	N/A
	Total	_	N/A	\$	N/A
tl tl	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		Ø	\$	390,744
	Accounting Fees			\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total		$\mathbf{\Sigma}$	\$	390,744

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXP	ENS	ES A	ND USE OF PR	OCE	EDS	<u> </u>
	 b. Enter the difference between the aggregate offer - Question 1 and total expenses furnished in respondifference is the "adjusted gross proceeds to the issue 	onse to Part C - Question 4.a.	Thi	S		\$_		755,664,218
5.	Indicate below the amount of the adjusted gross proto be used for each of the purposes shown. If the arguments have an estimate and check the box to the left payments listed must equal the adjusted gross process to Part C - Question 4.b. above.	mount for any purpose is not keet of the estimate. The total	nowr of th	1, e				
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees			\$_	0		\$_	0
	Purchase of real estate			\$_	0		\$_	0
	Purchase, rental or leasing and installation of machin	nery and equipment		\$	0		\$_	0
	Construction or leasing of plant buildings and facilit			\$	0		\$	0
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)				0		S	0
	•			\$_ •	0		° -	0
	Repayment of indebtedness		_	³ <u>-</u>		'	. –	
	Working capital Other (specify): Investment Capital			\$ _	0		\$ _	
	Other (specify): <u>Investment Capital</u>	***************************************		\$_	0	\square	\$ _	755,664,218
	Column Totals			\$_	0	Ø	\$ _	755,664,218
	Total Payments Listed (column totals added)				Ø \$	755,66	54,21	8
		D. FEDERAL SIGNATUI	RE					
f	The issuer has duly caused this notice to be signed by bollowing signature constitutes an undertaking by the if its staff, the information furnished by the issuer to an	issuer to furnish to the U.S. Se	curiti	ies an	d Exchange Comn	ussion,	upor	er Rule 505, the n written request
	uer (Print or Type) Idman Sachs Direct Strategies 2006 Fund, LLC	Signature			Date January <u>(()</u> , 20	M8		
G(numan sacus Direct strategies 2000 runu, LDC	K-IVW			g			
		Title of Signer (Print or Type) Authorized Signatory						
_		,						

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).